

## ISSUE SLIP SIMPLE AREA (for additional cross references)

POSITION -	INITIALS	ID NO.	DATE
	(-)		9-24-01
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>	LI	1106	10/24/01
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	1/21/01
2	1/21/01
3	1/21/01
4	1/21/01
5	1/21/01
6	1/21/01
7	1/21/01
8	
9	
10	1/21/01
11	1/21/01
12	N
13	N
14	
15	✓
16	✓
17	N
18	✓
19	✓
20	✓
21	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here